

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective December 8, 2004

09/970767

**CLAIMS AS FILED - PART I**

|   | (Column 1)   | (Column 2)   |
|---|--------------|--------------|
| TOTAL CLAIMS  |              |              |
| FOR   | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | minus 20 =   | *            |
| INDEPENDENT CLAIMS  | minus 3 =    | *            |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |              |              |

| SMALL ENTITY TYPE <input type="checkbox"/> |     | OR | OTHER THAN SMALL ENTITY |     |
|--|-----|----|-------------------------|-----|
| RATE                                       | FEE |    | RATE                    | FEE |
| BASIC FEE                                  |     | OR | BASIC FEE               |     |
| X\$ 25=                                    |     | OR | X\$50=                  |     |
| X100=                                      |     | OR | X200=                   |     |
| +180=                                      |     | OR | +360=                   |     |
| TOTAL                                      |     | OR | TOTAL                   |     |

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | * 26                             | Minus ** 32                        | = 0           |
| Independent   | * 3                              | Minus *** 3                        | = 0           |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| SMALL ENTITY     |                | OR | OTHER THAN SMALL ENTITY |                |
|------------------|----------------|----|-------------------------|----------------|
| RATE             | ADDITIONAL FEE |    | RATE                    | ADDITIONAL FEE |
| X\$ 25=          |                | OR | X\$50=                  |                |
| X100=            |                | OR | X200=                   |                |
| +180=            |                | OR | +360=                   |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE        |                |

9-22-06

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | * 26                             | Minus ** 32                        | =             |
| Independent   | * 3                              | Minus *** 3                        | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| SMALL ENTITY     |                | OR | OTHER THAN SMALL ENTITY |                |
|------------------|----------------|----|-------------------------|----------------|
| RATE             | ADDITIONAL FEE |    | RATE                    | ADDITIONAL FEE |
| X\$ 25=          |                | OR | X\$50=                  |                |
| X100=            |                | OR | X200=                   |                |
| +180=            |                | OR | +360=                   |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE        |                |

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | *                                | Minus **                           | =             |
| Independent   | *                                | Minus ***                          | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| SMALL ENTITY |                | OR | OTHER THAN SMALL ENTITY |                |
|--------------|----------------|----|-------------------------|----------------|
| RATE         | ADDITIONAL FEE |    | RATE                    | ADDITIONAL FEE |
| X\$ 25=      |                | OR | X\$50=                  |                |
| X100=        |                | OR | X200=                   |                |
| +180=        |                | OR | +360=                   |                |